

DIVERSELINE

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Current Issues of Healthcare Delivery Paper

PMO 526

September 19, 2002

Since the 1960's the American public has modified its expectations of healthcare professionals. The American public wants fast service, cutting-edge technology, availability of care, more involvement in the decision-making process, and finally, more options in the healthcare services that are available. In response to these new demands, healthcare as a profession has evolved. Today there is an increasing number of specialists in medicine. Completely new professions have emerged in response to the public's demand, the changing face of healthcare, and the increased complexity of technology. Additionally, alternative forms of healthcare have become more mainstream and acceptable in our society. The advent of managed care also affected healthcare professions. Managed care has forced the auxiliary healthcare professions into an ever-increasing role to meet demand and reduce costs. Managed care is also shifting the focus to primary care and prevention, rather than expensive diagnostics and treatments. Despite all these changes, or maybe because of, people are still attracted to healthcare as a profession. This is most likely due to the expanded number of healthcare professions and the expanding role of women and minorities.

So, how have expectations changed? To start, the public expects fast service. In today's society, we place ever more emphasis on time. Everything is determined by time and in general we are slaves to the clock. People expect to be seen at their designated appointment time, and that their wait will be kept to a minimum. They want more services on an outpatient basis. People want more care available to them. They expect both the numbers and locations of healthcare providers to be sufficient. This is often challenging in the traditionally under-served areas such as inner cities and rural areas.

Regardless of the quantity of service available in an area, all people expect the best possible care and the current technology. They expect to be seen by highly trained and qualified individuals and most people expect a service to be provided (i.e. an exam or diagnostic test) or a product dispensed (i.e. prescription) to give them something tangible to satisfy them that their healthcare need has been addressed.

Finally, the expectations as to the quality of care are higher. In today's "information age," people are more knowledgeable about healthcare issues than ever before. Thanks to the availability of information through various media, people have access to healthcare information that in the past they could only get directly from their doctor. The advent of the internet alone, has literally put medical information at the fingertips of the average American. Now people go to their healthcare provider armed with this knowledge and they expect a higher quality of care. This is beneficial in that it raises the bar for healthcare providers in the kind of care they provide. No longer will people be blindly led along by the healthcare experts. Patients want to be involved in the decision-making process. They want to be given choices and options for care, not just told this is the way they will be treated. People are increasingly seeking second opinions and requesting referrals to specialists. This has taken away some of the control normally held by healthcare providers and no doubt complicates their lives in some ways. Not all information available to people from external sources is reliable; therefore, people may have unrealistic expectations. As one team member put it, "What people want is not always what they need medically". Attempting to always meet people's expectations has the possibility of being detrimental to the healthcare industry by increasing costs from unnecessary diagnostics or treatments that are not harmful but nor are they warranted, so as to placate patients.

Healthcare professions have evolved over the past 40 years to keep pace with the changing times. One of the major changes discussed by our group is the creation of new health professions, such as Physician Assistants (PAs) and Nurse Practitioners (NPs). PAs provide services under the direct supervision of a licensed physician. PA positions have been increasing and are often a major source of healthcare professionals in rural and underserved areas. The medical profession views PAs as physician “extenders” by completing many of the routine duties of a physician. NPs are registered nurses who have completed formal programs of study preparing them for expanded roles and responsibilities. In addition to these, other professions such as dental hygienists, lab techs, occupational and physical therapists, X-ray techs, dieticians, and speech therapists, among others, have assumed a role in the provision of healthcare services.

Another change in the health profession is the continuing specialization of medicine. As our medical knowledge has advanced, it has become increasing more difficult to keep current on the advancements in all areas. This has facilitated the need for individuals that focus solely on one aspect of medicine. They are able to provide the best care for highly complex cases and can utilize the most advanced technology.

The rate of new technology development has also spurred changes in the healthcare professions. In addition to driving the specialization of medicine, it has also opened up new career fields in healthcare that were not available before. With the increased computerization of the healthcare field, there is a greater need for technical experts such as X-ray technicians, ultrasound techs, and MRI techs just to name a few. It is unrealistic and not cost-effective to expect a physician or nurse to be able to perform all these roles.

Today the healthcare profession has expanded to include more women and minorities. Over the past couple of decades, there has been a concerted effort to bring more women and minorities into the profession. The program appears to be working because both female and minority enrollments in medical schools have increased. This will have a great impact on healthcare because studies have shown that minority patients are four times more likely to receive care from minority physicians than non-minority ones. Low income, Medicaid recipients, and uninsured patients were also more likely to receive care from minority physicians. This is significant because these are often the underserved areas and the people less likely to seek care. This may be a driving force to bring healthcare to all sectors of the population.

Along the lines of minorities in the healthcare profession is the increasing role of International Medical Graduates (IMGs). Legislation that made it relatively easy for professionals from foreign countries to come to this country to obtain advanced graduate training and favorable immigration policies for physicians encouraged movement of IMGs to this country. IMGs have been increasingly taking over residency positions filling “gaps” in the healthcare system. This has been in response to U.S.-educated physicians often being unevenly distributed in the non-primary care specialties and the lack of physicians servicing rural and inner-city locations. Also, teaching hospitals have enjoyed relatively generous funding from the Medicare program to underwrite the costs of graduate medical education, which has resulted in more residency positions than there are U.S. graduates to fill them. Teaching hospitals have also had to compete with the increased market penetration of managed-care plans in urban areas. To compete teaching

hospitals have had to look for lower cost substitutes such as more residents because they are cheaper and work longer hours.

One other major change has been the increasing popularity of alternative medicine and its social acceptance. Alternative medicine professions can include chiropractors, acupuncturists, and homeopaths among others. These roles vary with different cultures and can include witchdoctors, shaman, and healers. A team member raised the possibility of this trend being the result of dissatisfaction with traditional healthcare services or an inherent weakness of the biomedical model, which emphasizes body over mind. It seems that a lot of people who seek alternative therapies may do so out desperation because they are dissatisfied with the results that they have received while undergoing more traditional medical treatments. Maybe in the future, these activities can be used in conjunction with traditional medicine and take on a “complimentary” role rather than an “alternative” one.

Changes in the healthcare delivery system have impacted on healthcare professions and are associated with some of the new trends that have occurred. Our group has come to the consensus that the emergence of managed-care has driven many of the changes. In particular, the emergence and increasing reliance on PAs and NPs seems to be caused by managed-care’s central theme of cost reduction. The effect of the desire for reduced costs is to find a cheaper alternative to physicians in the field of primary care, which these professions offer. As mentioned previously, they are playing an expanding role in underserved areas that are not traditionally evenly distributed with physicians. Because they are “physician extenders”, they can assume many of the responsibilities that physicians typically have, thus freeing physicians to see more patients and allotting their time for the more challenging cases. In theory, this gets more people through the door with less time before they can get in for an appointment. Additionally, the projected physician shortage that was expected to emerge also drove the development of PAs and NPs. This further increased the prevalence of PAs and NPs and expanded their roles.

An issue that was raised by our group regarding this change is “Do these professionals provide the quality of care required?”. Theoretically, their training should be sufficient for them to function in their assigned role and they are supposed to be working under the direct supervision of a licensed physician. However, there is some controversy over whether this actually happens. Some group members have expressed dissatisfaction with their experiences involving these personnel. It is felt that PAs are not utilized in ways they should be. Whether it is due to PAs assuming responsibilities that are beyond their training and experience or being forced to assume these responsibilities due to a lack of providers, it seems that in many instances that they are not filling the role of an extension of the physician. One group member expressed an opinion that they may even be more of a detriment at times because they must repeatedly query the physician regarding cases thus hampering his time and reducing costs as intended. There also seems to be some confusion on the part of the general public about the intended role of all these additional healthcare professionals and their capabilities. We feel a greater effort needs to be made to clearly delineate who is responsible for what. The group feels that these professionals have a role to play and can be an asset to the healthcare system but they must be supervised and used in their intended roles.

The healthcare professions have also been affected by the healthcare delivery system’s push to primary care and preventive medicine. The traditional role of healthcare

professionals treating illnesses as they come up and extended hospital stays have been replaced with an emphasis on primary care. Because of managed-care's policy of capitation, it is no longer cost efficient to subject people to lengthy and expensive treatments and hospitalization. The focus is now on preventing illness and keeping people healthy so they don't become sick in the first place, thus alleviating the expenditures for those involved treatments. The healthcare system has given the general practitioners the role of "gatekeepers" to limit the referrals to specialists and to decrease the use of expensive diagnostic tests. This is forcing a shift to the emphasis of primary care specialties both in the practice setting and in the medical school curricula.

Lastly, one other change that will affect the healthcare delivery system and in turn the healthcare professions is the aging population of the U.S. As the baby-boomers reach their elderly years, there is going to be an increased strain put on the healthcare system to supply the care and pay for it. This event has also helped shape the development of the new auxiliary healthcare professions because it supplies care without the expenses of highly trained physicians. As previously mentioned, the emphasis is to decrease hospital stays and provide more ambulatory care, so there are more of these new professions needed in the ambulatory care arena, for instance only 16% of PAs work in a hospital setting. Additionally, to meet the future's large healthcare demand, there will be a greater emphasis on home healthcare, which will require routine care procedures to be performed by trained professionals, such as NPs, in the patient's home.

With all the changes that have occurred over the past 40 years, a role in healthcare is still attractive as a profession. Over the years, there has been a steady increase in the number of medical school applicants and individuals entering the nursing field. One of the attractions is job security. There will always be a need for healthcare providers although their roles may change. It is a dynamic field with new technology and advancements occurring continually. For physicians, it still remains a prestigious and lucrative profession. The emergence of the new healthcare professions and the advanced technology have allowed other people that may not have considered one of the traditional roles to become involved in healthcare. They can earn decent livings without the large expenditure of time and money required of the more traditional positions. The attractions are variable and the choice a personal one.

Throughout the past four decades, the expectations of the U.S. public have changed in regards to healthcare. As care has modernized and technology advanced, people have come to expect fast service with highly, sophisticated equipment. But, not only do they want the best methods, they want options for treatment and they want to be involved in the decision-making process. In response to this technology and knowledge boom, specialists have emerged in ever-increasing numbers along with new professions that recently developed to meet healthcare demands. Because of the desire for treatment options, alternative forms of medicinal treatment are gaining popularity and acceptance. The development of the managed-care system and its shift to primary care have given the new professions more importance in the healthcare delivery system in their effort to reduce cost. More than ever people are drawn to the health care sector, thanks to the new professions that have been created, the advanced technology, and the increasing role of women and minorities. With all these changes, the healthcare system will continue to be one of the largest industries in the U.S. over the next 40 years.